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August 18, 2009 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB	3235-0287					
UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB	3235-0287					
Washington, D.C. 20549 Num						
Section 16. SECURITIES burde	January 31, 2005 nated average en hours per onse 0.5					
(Print or Type Responses)						
EASTMAN ROBERT H Symbol Issuer OHIO VALLEY BANC CORP	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
420 3PD AVE PO BOX 240 09/19/2000 below) bel	Officer (give title X_ Other (specify					
(Street) 4. If Amendment, Date Original 6. Individual or Joint/Gro Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Repo						
GALLIPOLIS, OH 45631-0240 Form filed by More than Person						
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Ber	neficially Owned					
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed3.4. Securities5. Amount of Securities6. Owner Form: Di Form: Di	ship 7. Nature of					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of	SEC 1474					

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr.	8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur (Instr	ities . 3 and 4)	(Instr. 5)	Bene Owne Follo Repo Trans (Instr	
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
EASTMAN ROBERT H 420 3RD AVE. P.O. BOX 240 GALLIPOLIS, OH 45631-0240				No longer subject to Sec. 16					
Signatures									
/s/ Deborah A. Carhart - Power of Attorney	of	08/1	8/2009						
**Signature of Reporting Person		D	ate						

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.